# Application for Action on an Approved Application or Petition

START HERE - Please Type or Print (Instructions on back)						FOR INS USE ONLY		
Part 1.	Information abou application or pet Organizations should use	<b>ition.</b> (Individ	luals should			Returned	Receipt	
Family Name	Given Name				Middle Initial	D		
Company Organization	or on Name	•			•	Resubmitted		
Address -								
Street Nand Nar					Apt #	Reloc Sent		
City			tate or rovince					
Country		•		Zip/Postal Code				
Date of Bi (Month/Da			ountry f Birth			Reloc Rec'd		
Social Security #	ŧ	IRS Tax #		A #				
Part 2.	Application type (	check one).				Applicant		
a. 🔲 1	I am applying for a duplica	te approval notic	e.			Interviewed		
I	I am requesting that a new Uprevious approval of a petition at:					Duplicate N American C (Location):	otice onsulate Notified at	
	I am requesting that a U.S. Opermanent resident. Please n			status has been	n adjusted to	☐ Application	Denied	
				_		Action Block		
Part 3.	Processing inform	ation.						
Type of Po	etition/ on (Form #)		Filing Receipt	:#				
Date of Fi	Date of Filing Date			pproved /Day/Year)				
_	etition is filed for a	nother pers	on, give	the follow	ving about			
	son you filed for:	I a.			I		G 14 11	
Family Name		Given Name			Middle Initial		To Be Completed by Attorney or Representative, if any	
Date of Bi (Month/D						Fill in box if G-28 is attached to represent the applicant		
A#						VOLAG#		
Part 4.	0	the information of leting this section		s in the instruc	etions before	ATTY State License #		
application any inform	ander penalty of perjury under n and the evidence submitted nation from my records whice eligibility for the benefit I as	er the laws of the I with it is all truc th the Immigratio	United State and correc	t. I authorize t	the release of			
Signature				Date				
Print You	r Name			†				

# Part 5. Signature of person preparing form, if other than above. (Sign Below)

I declare that I prepared this application at the request of the above person and it is based on information of which I have knowledge.

Signature	Print Your Name	Date
Firm Name and Address		

#### **Purpose of This Form.**

This form is used to request further action on a previously approved petition or application.

#### Who May File.

If you filed an application or petition which has been approved, use this form during the validity of the approved application or petition to:

- request a duplicate approval notice;
- request that another U.S.Embassy or consulate be notified of the approval of the petition; or
- request that a U.S. Embassy or consulate be notified that your status has been adjusted to permanent resident, so your spouse and children can apply for immigrant visas.

You should enclose a copy of the original approval notice. It may speed processing.

#### **General Filing Instructions.**

Please answer all questions by typing or clearly printing in black ink. Indicate that an item is not applicable with "N/A." If an answer is "none," write "none." If you need extra space to answer any item, attach a sheet of paper with your name and your alien registration number (A#), if any, and indicate the number of the item to which the answer refers. Your application must be properly signed and filed with the correct fee. If you are under 14 years of age, your parent or guardian may sign the application.

#### Where to File.

File this application with the INS Service Center or office that approved the original application or petition.

#### Fee.

The fee for this application is \$140.00. The fee must be submitted in the exact amount. It cannot be refunded. **DO NOT MAIL CASH.** 

All checks and money orders must be drawn on a bank or other institution located in the United States and must be payable in United States currency. The check or money order should be made payable to the Immigration and Naturalization Service, except that:

- if you live in Guam and are filing this application in Guam, make your check or money order payable to the "Treasurer, Guam."
- if you live in the Virgin Islands and are filing this application in the Virgin Islands, make your check or money order payable to the "Commissioner of Finance of the Virgin Islands."

Checks are accepted subject to collection. An uncollected check will render the application and any document issued invalid. A charge of \$30.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

## **Processing Information.**

Acceptance. Any application that is not signed or is not accompanied by the correct fee will be rejected with a notice that the application is deficient. You may correct the deficiency and resubmit the application. However, an application is not considered properly filed until accepted by the INS.

Initial processing. Once the application has been accepted, it will be checked for completeness. If you do not completely fill out the form, you will not establish a basis for eligibility, and we may deny your application. Requests for more information or interview. We may request more information or evidence or we may request that you appear at an INS office for an interview. We may also request that you submit the originals of any copy. We will return these originals when they are no longer required. Decision. You will be notified in writing of the decision on

# Penalties.

your application.

If you knowingly and willfully falsify or conceal a material fact or submit a false document with this request, we will deny the benefit you are seeking and may deny any other immigration benefit. In addition, you will face severe penalties provided by law, and may be subject to criminal prosecution.

### **Privacy Act Notice.**

We ask for the information on this form, and associated evidence to determine if you have established eligibility for the immigration benefit you are seeking. Our legal right to ask for this information is in 8 USC 1103. We may provide this information to other government agencies. Failure to provide this information and any requested evidence, may delay a final decision or result in denial of your request.

#### **Paperwork Reduction Act Notice.**

An agency may not conduct or sponsor an information collection and a person is not required to respond to an information collection unless it displays a currently valid OMB control number. The estimated average time to complete and file this application is as follows: (1) 5 minutes to learn about the law and form; (2) 5 minutes to complete the form; and (3) 15 minutes to assemble and file the application; for a total estimated average of 25 minutes per application. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Immigration and Naturalization Service, HQPDI, 425 I Street, N.W., Room 4034, Washington DC, 20536; OMB No. 1115-0176. DO NOT MAIL YOUR COMPLETED APPLICATION TO THIS ADDRESS.